



St. Andrew Bay Quilters' Guild - SABQG

Membership Registration

Please Print all Information

Name _____

Address _____

City, State, Zip _____

Phone(H) _____ Cell _____

Email address _____

Other mailing address _____

Birthday (Month/Day only) _____

Favorite Color(s) _____

Would you be willing to teach a workshop? _____ Demo? _____

Program? _____ Other? _____

If yes what topic(s) _____

What topic would you like to see in future workshops/demos/programs?

Dues are \$25, checks payable to "SABQG", return to Membership Chairman with payment.

By Mail to: SABQG P.O. Box 16225 Panama City, Fl. 32406
